FORM D

RECD S.E.C.

OCT 4 2002

OMB Approval

OMB Approval

3 Number 3235

OMB Number 3235-0076 Expires: May 31, 2005

Estimated average burden hours per response ...16.00

FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549=



NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
Prefix	Serial					
DATE RECEIVED						

Name of Offering (check if this is an amendment and name has changed, and indicate change.)								
MicroCoating Technologies, Inc. acquisition of certain assets of Photonic Sensor Systems, Inc.								
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE							
Type of Filing: New Filing Amendment								
A. BASIC IDENTIFICATION DATA								
Enter the information requested about the issuer								
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)								
MicroCoating Technologies, Inc.								
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)							
5315 Peachtree Industrial Boulevard, Chamblee, GA 30341	(678) 287-2400							
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)							
Brief Description of Business	DD00so-							
Electronic Components	FAUCESSE							
Type of Business Organization	D 00000							
☐ corporation ☐ limited partnership, already formed	other (please specify): OCT 0 9 2002							
business trust limited partnership, to be formed								
Actual or Estimated Date of Incorporation or Organization: Month 1 1	Year IHOMSON 9 3 🛭 Actual FINANOPAL							
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State;								
CN for Canada; FN for other foreign jurisdiction)	G A							

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-99) 1 of 6

2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ⊠ Beneficial Owner **Executive Officer** Check Box(es) that Apply: ☐ Promoter 冈 \boxtimes Director General and/or Managing Partner Full Name (Last name first, if individual) Hunt, Andrew T. Business or Residence Address (Number and Street, City, State, Zip Code) 5315 Peachtree Industrial Blvd., Atlanta, GA 30341 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Moore, Jeffrey C. Business or Residence Address (Number and Street, City, State, Zip Code) 715 Wilson Rd., Atlanta, GA 30341 Check Box(es) that Apply: Promoter ■ Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Huang, Lawrence P. Business or Residence Address (Number and Street, City, State, Zip Code) 1039 Ponte Vedra Boulevard, Ponte Vedra, FL 32082 Check Box(es) that Apply: ☐ Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Kelly, Jack R., Jr. Business or Residence Address (Number and Street, City, State, Zip Code) 9 North Parkway Square, 4200 Northside Parkway, NW, Atlanta, GA 30327 Check Box(es) that Apply: Promoter ■ Beneficial Owner **Executive Officer** \boxtimes Director General and/or Managing Partner Full Name (Last name first, if individual) Tatum, Charles M. Business or Residence Address (Number and Street, City, State, Zip Code) 100 Independence Mall West, Philadelphia, PA 19106 Check Box(es) that Apply: Promoter Beneficial Owner **Executive Officer** Director General and/or Managing Partner Full Name (Last name first, if individual) Witschonke, Ross Business or Residence Address (Number and Street, City, State, Zip Code) Ballard Power Systems Inc., 9000 Glenlyon Parkway, Burnaby, BC V5J5J9 Executive Officer Check Box(es) that Apply: Promoter ☐ Beneficial Owner 冈 Director General and/or Managing Partner Full Name (Last name first, if individual) Lamola, Angelo A. Business or Residence Address (Number and Street, City, State, Zip Code) P.O. Box 913, 1655 Woodbridge Lane, Worchester, PA 19490

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

A. BASIC IDENTIFICATION DATA								
2. Enter the information requested for the following:								
 Each promoter of the issuer, if the issuer has been organized within the past five years; 	• Each promoter of the issuer, if the issuer has been organized within the past five years;							
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;								
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and								
Each general and managing partner of partnership issuers.								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/o Managing Par								
Full Name (Last name first, if individual)								
Smith, David A.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
5315 Peachtree Industrial Blvd., Atlanta, GA 30341								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Par	-							
Full Name (Last name first, if individual)								
Edwards, John G.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
5315 Peachtree Industrial Blvd., Atlanta, GA 30341								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Part								
Full Name (Last name first, if individual)								
Marry, Pat								
Business or Residence Address (Number and Street, City, State, Zip Code)								
5315 Peachtree Industrial Blvd., Atlanta, GA 30341								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Part								
Full Name (Last name first, if individual)								
Fortunato, Fred								
Business or Residence Address (Number and Street, City, State, Zip Code)								
5315 Peachtree Industrial Blvd., Atlanta, GA 30341								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Part								
Full Name (Last name first, if individual)								
Ballard Power Systems Inc.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
9000 Glenlyon Parkway, Burnaby, BC V5J5J9								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Part								
Full Name (Last name first, if individual)								
Noro-Moseley Partners IV, L.P.								
Business or Residence Address (Number and Street, City, State, Zip Code)								
4200 Northside Parkway, 9 North Parkway Square, Atlanta, GA 30327								
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Part								
Full Name (Last name first, if individual)								
Business or Residence Address (Number and Street, City, State, Zip Code)								

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

					В. І	NFOR	MATIC	N ABO	OUT O	FFERI	VG	_				
1.	Has the iss	uer sold o	or does th	e issuer ir	ntend to s	ell to non	-accredit	ed invest	ors in this	offering	?				es	No
	Answer also in Appendix, Column 2, if filing under ULOE.									\boxtimes						
2.	2. What is the minimum investment that will be accepted from any individual?											<u>\$1,0</u>	000			
											Y	'es	— No			
3.	Does the of	fering pe	rmit ioint	ownersh	ip of a si	ngle unit?	ı							_		\boxtimes
			•		•	-		or will	he naid	or give	directly	v or indir	ectly a	n _V		
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a									fa							
	person to b															
	states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.															
Full Name (Last name first, if individual)																
Busin	ess or Res	dence Ac	idress (N	umber an	d Street,	City, Stat	e, Zip Co	de)				_		_		
Name	of Associa	ated Brok	er or Dea	ller												
States	in Which	Person L	isted Has	Solicited	or Intend	ls to Solid	cit Purcha	isers								
-	k "All Stat		eck indiv							•••••		•••••		All States		
[AL]		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]				
[IL]	-	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[IM]	[MN]	[MS]	[MO]				
[MT] [RI]		[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[WI]	[OR] [WY]	[PA] [PR]				
	Vame (Last			<u>-</u>	[01]	[4 1]	[AY]	[NA]	[HV]	[MT]	[141]	[FK]		-		
Busin	ess or Resi	dence Ad	ldress (Ni	umber and	d Street, (City, State	e, Zip Co	de)								
Name	of Associa	ated Brok	er or Dea	ler			_					_				
1 1411110	017155001		0. 50													
	in Which													4.11.C	,	
-	k "All Stat												Ц	All States		
[IL]	[AK] [IN]	[AZ]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[ID] [MO]				
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]				
[RI]	[sc]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]				
Full N	lame (Last	name fire	st, if indiv	idual)												
Busin	ess or Resi	dence Ad	ldress (N	ımber and	d Street, (City, State	e, Zip Co	de)								
Name	of Associa	ated Brok	er or Dea	ler									***			
States	in Which	Person Li	isted Has	Solicited	or Intend	ls to Solic	it Purcha	isers								
(Check "All States" or check individual States)																
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]				
[IL]		[IA]	[KS]	[KY]	[LA]	[AM]	[MD]	[ME]	[MI]	[MN]	[MS]	[MO]				
[MT]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[YY] [VT]	[NC] [VA]	[MD] [WA]	[OH]	[OK]	[OR] [WY]	[PA] [PR]				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount
	Debt	\$	Already Sold \$
	Equity	\$a	
	☐ Common ☐ Preferred	Φ	\$
	Convertible Securities (including warrants)	\$	¢
	Partnership Interests	\$. 3
	Other (Specify)	·	\$
		\$	\$a
	Total	\$a	\$
	Answer also in Appendix, Column 3, if filing under ULOE		
- 40 2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
			Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors	0	\$ 0
	Non-accredited Investors	1	ф <u>Б</u>
	Total (for filings under Rule 504 only)	1	ę b
		1	Φ
b 4n	Answer also in Appendix, Column 4, if filing under ULOE		
3.	,000 shares of the issuer's common stock. If this filing is for an offering under Rule 504 or 505, enter the information requested for all		
J.	securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.		
	Type of offering	Type of	Dollar
		Security	Amount Sold
	Rule 505	N/A	\$ <u>N/A</u>
	Regulation ARule 504	N/A	\$ <u>N/A</u>
			2
	Total		3
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	🖂	\$ 10,000
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (Specify finder's fees separately		\$
	Other Expenses (identify)	_	\$

	Total				\boxtimes	\$	10,000
	b. Enter the difference between the aggregat Question 1 and total expenses furnished in resp the "adjusted gross proceeds to the issuer."	e offering price given in response to Part onse to Part C-Question 4.a. This difference	t C- ce is		_	-	N/A°
5.	Indicate below the amount of the adjusted gros used for each of the purposes shown. If the an estimate and check the box to the left of the equal the adjusted gross proceeds to the issuer above.	nount for any purpose is not known, furnish stimate. The total of the payments listed n	n an nust				
				Payments to Officers, Directors, & Affiliates			yments to Others
	Salaries and fees		🔲	\$		\$ _	
	Purchase of real estate		🔲	\$	_ 🗆	\$ _	
	Purchase, rental or leasing and installation of	• • •		\$	\Box	\$ _	
	Construction or leasing of plant buildings at	nd facilities	🔲	\$		\$ _	
	Acquisition of other businesses (includin offering that may be used in exchange for pursuant to a merger)	or the assets or securities of another issue	er	\$		\$	
	Repayment of indebtedness		🗖	\$		\$ —	
	Working capital		🔲	\$	_	\$ —	
	Other (specify)			\$		\$ <u></u>	
				\$		\$	
	Column Totals					\$	
	Total Payments Listed (column totals added)		\$	_ — N/A	4° —	
c Tra	insaction reported in this Form D is a stock-for-asset			<u> </u>			
		D. FEDERAL SIGNATURE		****			
signa	issuer has duly caused this notice to be signed be ature constitutes an undertaking by the issuer to mation furnished by the issuer to any non-accred	furnish to the U.S. Securities and Exchange	Comm	ission, upon writte	Rule 5	505, the	e following ts staff, the
	er (Print or Type) roCoating Technologies, Inc.	Signature XV XV XV	J	Date October 3, 2002			
Nam	e of Signer (Print or Type)	Title of Signer (Print or Type) CFO					